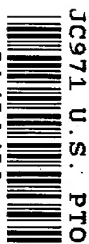


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|--|-------------------------|--|
| UTILITY<br>PATENT APPLICATION<br>TRANSMITTAL | Attorney Docket No.:    | TC00152  |
|  | First Inventor:         | Bernhard P. Weisshaar et al.   |
|  | Title:                  | METHOD OF SELECTING A COMMUNICATION INTERFACE<br>TO TRANSMIT DATA IN A WIRELESS COMMUNICATION<br>NETWORK |
|  | Express Mail Label No.: | EV041518109US  |

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| APPLICATION ELEMENTS<br>(see MPEP chapter 600 concerning<br>utility patent application contents)  | ADDRESS TO:  |  |
|---|--|--|
|   | Assistant Commissioner for Patents<br>Box Patent Application<br>Washington, D.C. 20231   |  |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate<br>(Submit an original and a duplicate for fee processing)   | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large<br>table or Computer Program (Appendix)   |  |
| 2. <input type="checkbox"/> Applicant claims small entity status<br>See 37 CFR 1.27   | 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence<br>(if applicable, all necessary)  |  |
| 3. <input checked="" type="checkbox"/> Specification Total Pages <b>27</b><br>(preferred arrangement set forth below)<br>-Descriptive title of the invention<br>-Cross Reference to Related Applications<br>-Statement Regarding Fed sponsored R&D<br>-Reference to sequence listing, a table,<br>-Background of the Invention<br>-Brief Summary of the Invention<br>-Brief Description of the Drawings (if filed)<br>-Detailed Description<br>-Claim(s)<br>-Abstract of the Disclosure | a. <input type="checkbox"/> Computer Readable Form (CFR)<br>b. <input type="checkbox"/> Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies);<br>ii. <input type="checkbox"/> or paper<br>c. <input type="checkbox"/> Statements verifying identify of above copies |  |
| 4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets <b>6</b>   | ACCOMPANYING APPLICATION PARTS   |  |
| 5. Oath or Declaration<br>a. <input checked="" type="checkbox"/> Unexecuted (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37<br>CFR 1.63(d)) (for continuation/ divisional with<br>Box 18 completed)<br>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting<br>inventor(s) named in the prior application,<br>see 37 CFR 1.63(d)(2) and 1.33(b).   | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))  |  |
| 6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76  | 10. <input type="checkbox"/> 37 CFR 3.73(b) <input type="checkbox"/> Power of Attorney<br>Statement (when there is an assignee)  |  |
|   | 11. <input type="checkbox"/> English Translation Document (if applicable)  |  |
|   | 12. <input type="checkbox"/> IDS <input type="checkbox"/> Copies of IDS Citations  |  |
|   | 13. <input type="checkbox"/> Preliminary Amendment   |  |
|   | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)   |  |
|   | 15. <input type="checkbox"/> Certified Copy of Priority Document   |  |
|   | 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C.<br>122(b)(2)(B)(i). Applicant must attach form<br>PTO/SB/35 or its equivalent.   |  |
|   | 17. <input type="checkbox"/> Other: _____  |  |

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in- Part (CIP) Prior Appl. No. Prior Appl. information: Examiner:  Group/Art Unit: 

For CONTINUATION OR DIVISIONAL APPS only The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

## 19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 23330 or ☐ Correspondence address below

|           |                                    |           |                  |                 |          |
|-----------|------------------------------------|-----------|------------------|-----------------|----------|
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| Address   | Motorola, Inc. - Law Department    |           |                  |                 |          |
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| Name      | S. Kevin Pickens                   |           | Registration No. | 34,696          |          |
| SIGNATURE | S. Kevin Pickens                   |           | Date             | January 4, 2002 |          |

|  |                     |                          |                       |
|--|---------------------|--------------------------|-----------------------|
| <b>FEE TRANSMITTAL</b><br><br>Patent fees are subject to annual revision |                     | <i>Complete if Known</i> |                       |
|  |                     | Application Number       |                       |
|  |                     | Filing Date              |                       |
|  |                     | First Named Inventor     | Bernhard P. Weisshaar |
|  |                     | Examiner Name            |                       |
|  |                     | Group Art Unit           |                       |
| TOTAL AMOUNT OF PAYMENT  | (\$) <b>1172.00</b> | Attorney Docket No.      | TC00152               |

| METHOD OF PAYMENT  | FEE CALCULATION (continued)  |                   |                 |  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
|--|--|-------------------|-----------------|--|-------------------------------------|----------|-----|-----|-------------------------------------|--------|--------------------|--------|-----|-------------------------------------|--------|--------------------|-------------------|-----|---------------------------|-----|----------------|-----------------|------------------|---|-----------------|------|-----|------|--|------------------------|-------|-----|-------|---|-----------------------------------|-----|---------------------|-----|--|---------------------------------------|-----|--------------------------|-----|---|---|-----|-----|-----|--|---|---------------------|-----|-----|---|-----|--------------------------|-----|-----|--|-----|-----|-----|-----|------------------|-----|-----|-----|-----|--|-----|-----|-----|-----|--------------------------|-----|------|-----|------|---|-----|-----|-----|----|----------------------------------|-----|------|-----|-----|------------------------------------|-----|------|-----|-----|--------------------------------|-----|-----|-----|-----|------------------|-----|-----|-----|-----|-----------------|-----|-----|-----|-----|-------------------------------|-----|----|-----|----|-------------------------------------|-----|-----|-----|-----|-------------------|-----|----|-----|----|--|-----|-----|-----|-----|---|-----|-----|-----|-----|--|-----|-----|-----|-----|---|-----|-----|-----|-----|---|---------------------------|--|--|--|--|
| <b>1.</b> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:<br>Deposit Account Number <span style="border: 1px solid black; padding: 2px;">13-4771</span><br>Deposit Account Name <span style="border: 1px solid black; padding: 2px;">Motorola, Inc.</span><br><br><input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  | <b>3. ADDITIONAL FEES</b><br><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td></tr> <tr><td>147</td><td>2520</td><td>147</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>113</td><td>1840*</td><td>113</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td></tr> <tr><td>118</td><td>1440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td></tr> <tr><td>128</td><td>1960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td></tr> <tr><td>138</td><td>1510</td><td>138</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>141</td><td>1280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td></tr> <tr><td>142</td><td>1280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="5">Other fee (specify) _____</td></tr> </tbody> </table> | Large Entity      | Small Entity    | Fee Description  | 105                                 | 130      | 205 | 65  | Surcharge - late filing fee or oath | 127    | 50                 | 227    | 25  | Surcharge - late Provisional filing | 139    | 130                | 139               | 130 | Non-English specification | 147 | 2520           | 147             | 2520             | For filing a request for ex parte Reexamination | 112             | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | 113                    | 1840* | 113 | 1840* | Requesting publication of SIR after Examiner action | 115                               | 110 | 215                 | 55  | Extension for reply within first month | 116                                   | 400 | 216                      | 200 | Extension for reply within second month | 117   | 920 | 217 | 460 | Extension for reply within third month | 118   | 1440                | 218 | 720 | Extension for reply within fourth month | 128 | 1960                     | 228 | 980 | Extension for reply within fifth month | 119 | 320 | 219 | 160 | Notice of Appeal | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | 121 | 280 | 221 | 140 | Request for oral hearing | 138 | 1510 | 138 | 1510 | Petition to institute a public use proceeding | 140 | 110 | 240 | 55 | Petition to revive - unavoidable | 141 | 1280 | 241 | 640 | Petition to revive - unintentional | 142 | 1280 | 242 | 640 | Utility issue fee (or reissue) | 143 | 460 | 243 | 230 | Design issue fee | 144 | 620 | 244 | 310 | Plant issue fee | 122 | 130 | 122 | 130 | Petitions to the Commissioner | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | 126 | 180 | 126 | 180 | Submission of IDS | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | 169 | 900 | 169 | 900 | Request for expedited examination of a design application | Other fee (specify) _____ |  |  |  |  |
| Large Entity   |  | Small Entity      | Fee Description |  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 105  |  | 130               | 205             | 65   | Surcharge - late filing fee or oath |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 127  | 50   | 227               | 25              | Surcharge - late Provisional filing  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 139  | 130  | 139               | 130             | Non-English specification  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 147  | 2520   | 147               | 2520            | For filing a request for ex parte Reexamination                            |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 112  | 920*   | 112               | 920*            | Requesting publication of SIR prior to Examiner action                     |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 113  | 1840*  | 113               | 1840*           | Requesting publication of SIR after Examiner action                        |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 115  | 110  | 215               | 55              | Extension for reply within first month                                     |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 116  | 400  | 216               | 200             | Extension for reply within second month                                    |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 117  | 920  | 217               | 460             | Extension for reply within third month                                     |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 118  | 1440   | 218               | 720             | Extension for reply within fourth month                                    |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 128  | 1960   | 228               | 980             | Extension for reply within fifth month                                     |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 119  | 320  | 219               | 160             | Notice of Appeal   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 120  | 320  | 220               | 160             | Filing a brief in support of an appeal                                     |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 121  | 280  | 221               | 140             | Request for oral hearing   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 138  | 1510   | 138               | 1510            | Petition to institute a public use proceeding                              |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 140  | 110  | 240               | 55              | Petition to revive - unavoidable   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 141  | 1280   | 241               | 640             | Petition to revive - unintentional   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 142  | 1280   | 242               | 640             | Utility issue fee (or reissue)   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 143  | 460  | 243               | 230             | Design issue fee   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 144  | 620  | 244               | 310             | Plant issue fee  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 122  | 130  | 122               | 130             | Petitions to the Commissioner  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 123  | 50   | 123               | 50              | Processing fee under 37 CFR 1.17(q)  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 126  | 180  | 126               | 180             | Submission of IDS  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 581  | 40   | 581               | 40              | Recording each patent assignment per property (times number of properties) |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 146  | 740  | 246               | 370             | Filing a submission after final rejection (37 CFR § 1.129(a))              |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 149  | 740  | 249               | 370             | For each additional invention to be examined (37 CFR § 1.129(b))           |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 179  | 740  | 279               | 370             | Request for Continued Examination (RCE)                                    |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 169  | 900  | 169               | 900             | Request for expedited examination of a design application                  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Other fee (specify) _____  |  |                   |                 |  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>2.</b> <input type="checkbox"/> Payment Enclosed.<br><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other  |  |                   |                 |  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>FEE CALCULATION</b><br><br><b>BASIC FILING FEE</b><br><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td>740.00</td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td><td><b>(\$)<b>740.00</b></b></td></tr> </tbody> </table>   | Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$)  | Fee Description                     | Fee Paid | 101 | 740 | 201                                 | 370    | Utility filing fee | 740.00 | 106 | 330                                 | 206    | 165                | Design filing fee |     | 107                       | 510 | 207            | 255             | Plant filing fee |   | 108             | 740  | 208 | 370  | Reissue filing fee                                     |                        | 114   | 160 | 214   | 80  | Provisional filing fee            |     | <b>SUBTOTAL (1)</b> |     |  |                                       |     | <b>(\$)<b>740.00</b></b> |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Large Fee Code   | Entity Fee (\$)  | Small Fee Code    | Entity Fee (\$) | Fee Description  | Fee Paid                            |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 101  | 740  | 201               | 370             | Utility filing fee   | 740.00                              |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 106  | 330  | 206               | 165             | Design filing fee  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 107  | 510  | 207               | 255             | Plant filing fee   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 108  | 740  | 208               | 370             | Reissue filing fee   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 114  | 160  | 214               | 80              | Provisional filing fee   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>SUBTOTAL (1)</b>  |  |                   |                 |  | <b>(\$)<b>740.00</b></b>            |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>2. EXTRA CLAIM FEES</b><br><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Previously Paid**</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>30</td> <td>20</td> <td>10</td> <td>18</td> <td>180.00</td> </tr> <tr> <td>Independent Claims</td> <td>6</td> <td>3</td> <td>84</td> <td>252.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>280</td> <td>0</td> </tr> </tbody> </table><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>* Reissue independent claims over original patent</td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>* Reissue claims in excess of 20 and over original patent</td></tr> <tr><td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td><td><b>(\$)<b>432.00</b></b></td></tr> </tbody> </table> | Total Claims   | Previously Paid** | Extra Claims    | Fee from below   | Fee Paid                            | 30       | 20  | 10  | 18                                  | 180.00 | Independent Claims | 6      | 3   | 84                                  | 252.00 | Multiple Dependent |                   |     | 280                       | 0   | Large Fee Code | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$)                                 | Fee Description | 103  | 18  | 203  | 9  | Claims in excess of 20 | 102   | 84  | 202   | 42  | Independent claims in excess of 3 | 104 | 280                 | 204 | 140                                    | Multiple dependent claim, if not paid | 109 | 84                       | 209 | 42                                      | * Reissue independent claims over original patent | 110 | 18  | 210 | 9                                      | * Reissue claims in excess of 20 and over original patent | <b>SUBTOTAL (2)</b> |     |     |   |     | <b>(\$)<b>432.00</b></b> |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Total Claims   | Previously Paid**  | Extra Claims      | Fee from below  | Fee Paid   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 30   | 20   | 10                | 18              | 180.00   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Independent Claims   | 6  | 3                 | 84              | 252.00   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Multiple Dependent   |  |                   | 280             | 0  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Large Fee Code   | Entity Fee (\$)  | Small Fee Code    | Entity Fee (\$) | Fee Description  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 103  | 18   | 203               | 9               | Claims in excess of 20   |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 102  | 84   | 202               | 42              | Independent claims in excess of 3  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 104  | 280  | 204               | 140             | Multiple dependent claim, if not paid                                      |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 109  | 84   | 209               | 42              | * Reissue independent claims over original patent                          |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 110  | 18   | 210               | 9               | * Reissue claims in excess of 20 and over original patent                  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>SUBTOTAL (2)</b>  |  |                   |                 |  | <b>(\$)<b>432.00</b></b>            |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| **OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.<br>*For Reissues, see above   |  |                   |                 |  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>SUBTOTAL (3)</b> <b>(\$)<b>0</b></b>  |  |                   |                 |  |                                     |          |     |     |                                     |        |                    |        |     |                                     |        |                    |                   |     |                           |     |                |                 |                  |   |                 |      |     |      |  |                        |       |     |       |   |                                   |     |                     |     |  |                                       |     |                          |     |   |   |     |     |     |  |   |                     |     |     |   |     |                          |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |

|                     |                         |                                 |                 |
|---------------------|-------------------------|---------------------------------|-----------------|
| <b>SUBMITTED BY</b> |                         | <i>Complete (if applicable)</i> |                 |
| Name (Print/Type)   | S. Kevin Pickens        | Registration No.                | 34,696          |
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|                     |                         | Date                            | January 4, 2002 |